# FORM (RF-3)

## SUMMARY SHEET

| (1)  | (2)<br>Annual Premium            | (3)<br>Percent                        |
|--|----------------------------------|---------------------------------------|
| Coverage   | - Volume (Illinois) *            | _ Change (+or-) **                    |
| Automobile Liability Private   |                                  |                                       |
| Passenger  |                                  |                                       |
| Commercial   | 111,880                          | 0.07%                                 |
| Automobile Physical Dama   | g                                |                                       |
| Private Passenger  |                                  |                                       |
| Commercial   | 39,718                           | 0.0%                                  |
| Liability Other Than Auto  |                                  |                                       |
| Burglary and Theft   |                                  |                                       |
| Glass  |                                  |                                       |
| Fidelity   |                                  | _                                     |
| Surety   |                                  |                                       |
| Boiler and Machinery   |                                  |                                       |
| Fire   |                                  |                                       |
| Extended Coverage  |                                  |                                       |
| Inland Marine  |                                  |                                       |
| Homeowners   |                                  |                                       |
| Commercial Multi-Peril   |                                  |                                       |
| Crop Hail  |                                  |                                       |
| Other  |                                  |                                       |
| Line of Insurance  |                                  | · · · · · · · · · · · · · · · · · · · |
| Does filing only apply to ce<br>Classes? If so,<br>specify:          | ertain territory (territories) o | rcertain                              |
| Brief description of filing. (                                       | If filing follows rates of an a  | advisory                              |
| Organization, specify  | g ionomo fatos of attro          |                                       |
| organization):   | Adoption of ISO loss cost        | s                                     |
|  |                                  |                                       |
| *Adjusted to reflect all prior                                       | rate changes                     |                                       |
| *Adjusted to reflect all prior<br>**Change in Company's pr<br>rates. |                                  | ilt from application of ne            |
|  | Argonaut Great C                 | entral Insurance Company              |
|  | Na                               | me of Company                         |
|  |                                  | d, SVP - General Counsel              |

# FORM (RF-3)

#### **SUMMARY SHEET**

| (1)  | (2)<br>Annual Premium                   | (3)<br>Percent  |
|--|---|---|
| Coverage   | <ul> <li>Volume (Illinois) *</li> </ul> | _ Change (+or-) **  |
| Automobile Liability Private   |   |   |
| Passenger  |   |   |
| Commercial   | 6,086                                   | 0.07%   |
| Automobile Physical Damag  | 9                                       |   |
| Private Passenger  |   | orașio di Pere e de <u>la constanta de la constanta</u> |
| Commercial   | 1,046                                   | 0.0%  |
| Liability Other Than Auto  |   |   |
| Burglary and Theft   |   |   |
| Glass  |   |   |
| Fidelity   |   |   |
| Surety   |   |   |
| Boiler and Machinery   |   |   |
| Fire   |   |   |
| Extended Coverage  |   |   |
| Inland Marine  |   |   |
| Homeowners   |   |   |
| Commercial Multi-Peril   |   |   |
| Crop Hail  | <del></del>                             |   |
| Other  |   |   |
| Line of Insurance  |   |   |
| Does filing only apply to cer<br>Classes? If so,<br>specify:           | rtain territory (territories) o         | r certain   |
| Brief description of filing. (I  | f filing follows rates of an a          | advisory  |
| Organization, specify  | g randito rated of an t                 |   |
| organization):   | Adoption of ISO loss cos                | ts  |
| - 3  |   |   |
|  |   |   |
| *Adjusted to reflect all prior<br>**Change in Company's pre-<br>rates. | •                                       | ult from application of ne  |
|  | Argonaut Insuran                        | ce Company  |
|  |   | ame of Company  |
|  |   | d, SVP - General Counsel  |

1.

2.

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

#### Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

#### SUMMARY SHEET

| Change in Company's premium effective 10/18/2014 | or rate level produced by rat<br>—. | e revision       |
|--|-------------------------------------|------------------|
| (1)  | (2)<br>Annual Premium               | (3)<br>Percent   |
| Coverage   | Volume (Illinois) *                 | Change (+or-) ** |
| Automobile Liability Private Passenger           |                                     |                  |
| Commercial                                       | 38,140                              | 8.0              |
| Automobile Physical Damage Private Passenger     |                                     |                  |
| Commercial _                                     | 30,468                              | 8.0              |
| Liability Other Than Auto                        |                                     |                  |
| Burglary and Theft                               |                                     |                  |
| Glass  |                                     |                  |
| Fidelity   |                                     |                  |
| Surety   |                                     |                  |
| Beiler and Machinery                             |                                     |                  |
| Fire   |                                     |                  |
| Extended Coverage                                |                                     |                  |
| Inland Marine                                    |                                     |                  |
| Homeowners                                       |                                     |                  |
| Commercial Multi-Peril                           |                                     |                  |
| Crop Hail  |                                     |                  |
| Other  |                                     |                  |
| Life of Insurance                                |                                     |                  |

Classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): ISO Adoption CA-2014-BRLA1

Does filing only apply to certain territory (territories) or certain

North Pointe Insurance Company

Name of Company

Janet Kiger - VP Rate & Form Filings

Official - Title

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

# FORM (RF-3)

## SUMMARY SHEET

| (1)   | (2) Annual Premium                    | (3) Percent                           |
|---|---------------------------------------|---------------------------------------|
| Coverage  | - Volume (Illinois) *                 | _ Change (+or-) **                    |
| Automobile Liability Private                                |                                       |                                       |
| Passenger   |                                       |                                       |
| Commercial  | 603,387                               | 10.00%                                |
| Automobile Physical Damag                                   | _                                     |                                       |
| Private Passenger   |                                       | <del></del>                           |
| Commercial  | <del></del>                           |                                       |
| Liability Other Than Auto                                   | <del></del>                           |                                       |
| Burglary and Theft  |                                       |                                       |
| Glass   | · · · · · · · · · · · · · · · · · · · |                                       |
| Fidelity  |                                       |                                       |
| Surety  |                                       |                                       |
| Boiler and Machinery  |                                       |                                       |
| Fire  |                                       |                                       |
| Extended Coverage   |                                       |                                       |
| nland Marine  | · · · · · · · · · · · · · · · · · · · |                                       |
| Homeowners  |                                       |                                       |
| Commercial Multi-Peril                                      |                                       |                                       |
| Crop Hail   |                                       | <del></del>                           |
| Other Line of Income  |                                       | · · · · · · · · · · · · · · · · · · · |
| Line of Insurance   |                                       |                                       |
| Does filing only apply to cer                               | tain territory (territories) or       | certain                               |
| Classes? If so,   | , ,                                   |                                       |
| specify: Comm   | nercial Auto - Public Auto Liability  |                                       |
|   |                                       |                                       |
| Brief description of filing. (If                            | filing follows rates of an a          | dvisory                               |
| Organization, specify                                       | •                                     | •                                     |
| organization):  | Revised LCM                           |                                       |
| Commercial Auto - Public Auto Liabilit                      | y Other Than Zone Rated - 1.87        |                                       |
| Commercial Auto - Public Auto Liability-                    | Zone Rated - 1.71                     | ,                                     |
| *Adjusted to reflect all prior<br>**Change in Company's pre |                                       | lt from application of n              |
| rates.  |                                       |                                       |
|   |                                       | Casualty Company of North C           |
|   |                                       | me of Company                         |
|   | Christy I Moore S                     | tate Filing Analyst II                |

## FORM (RF-3)

#### SUMMARY SHEET

| Change in Company's premium or rate level produced by rate revision |
|---|
| effective <u>10/18/2014</u>   |
|   |

|      | (1)<br>Coverage   | (2)<br>Annual Premium<br>Volume (Illinois) * | (3) Percent Change (+or-) ** |
|------|---|--|------------------------------|
| 1.   | Automobile Liability Private                                      | voidine (iiiiie)                             |                              |
| •    | Passenger   |  |                              |
|      | Commercial  | 652,746                                      | 8.0                          |
| 2.   | Automobile Physical Damage  |  |                              |
|      | Private Passenger   |  |                              |
|      | Commercial  | 934,025                                      | 8.0                          |
| 3.   | Liability Other Than Auto   |  |                              |
| ١.   | Burglary and Theft  |  |                              |
| 5.   | Glass   |  |                              |
| 3.   | Fidelity  |  |                              |
| 7.   | Surety  |  |                              |
| 3.   | Boiler and Machinery  |  |                              |
| €.   | Fire  |  |                              |
| i O. | Extended Coverage   |  |                              |
| 1.   | Inland Marine   |  |                              |
| 2.   |   |  |                              |
| 13.  | Commercial Multi-Peril  |  |                              |
| 4.   | Crop Hail   |  | <del></del>                  |
| 5.   | OtherLife of Insurance  |  |                              |
|      | Life of Insurance   |  |                              |
|      | Does filing only apply to certain t Classes? If so, specify:      | erritory (territories) or certa              | in<br>                       |
|      | Brief description of filing. (If filing                           | follows rates of an advisor                  |                              |
|      | Organization, specify   | TOHOWS FALES OF ALL AUVISOR                  | у                            |
|      | organization): ISO Adoption CA-                                   | 2014-BRÍ A1                                  |                              |
|      | organization). Iso recoption or                                   | 2017 011271                                  |                              |
|      |   |  |                              |
|      | *Adjusted to reflect all prior rate **Change in Company's premiun |  | n application of new rates.  |
|      |   | Praetorian Insura                            | ance Company                 |
|      |   |  | ame of Company               |
|      |   |  | Rate & Form Filings          |

## FORM (RF-3)

#### **SUMMARY SHEET**

| Change in Company's premium or effective 10/18/2014 | rate level produced by rate revision |
|---|--------------------------------------|
| enective 10/10/2014                                 | •                                    |
|   |                                      |
| (1)   | (0)                                  |
| [ ] ]   | (/)                                  |

|     | (1)  | (2)<br>Annual Premium             | (3)<br>Percent            |
|-----|--|-----------------------------------|---------------------------|
|     | Coverage   | Volume (Illinois) *               | Change (+or-) **          |
| 1.  | Automobile Liability Private Passenger   |                                   |                           |
|     | Commercial   | 369,873                           | 8.0                       |
| 2.  | Automobile Physical Damage Private Passenger   |                                   |                           |
|     | Commercial   | 63,336                            | 8.0                       |
| 3.  | Liability Other Than Auto  |                                   |                           |
| 4.  | Burglary and Theft   |                                   |                           |
| 5.  | Glass  |                                   |                           |
| 6.  | Fidelity   |                                   |                           |
| 7.  | Surety   |                                   |                           |
| 8.  | Boiler and Machinery   |                                   |                           |
| 9.  | Fire   |                                   |                           |
| 10. | Extended Coverage  |                                   |                           |
| 11. | Inland Marine  |                                   |                           |
| 12. | Homeowners   |                                   |                           |
| 13. |  |                                   |                           |
| 14. | •  |                                   |                           |
| 15. |  |                                   |                           |
|     | Life of Insurance  |                                   |                           |
|     | Does filing only apply to certain to Classes? If so, specify:                                  | erritory (territories) or certaiı | n                         |
|     |  |                                   |                           |
|     | Brief description of filing. (If filing Organization, specify organization): ISO Adoption CA-2 | ·                                 |                           |
|     | <u> </u>   |                                   |                           |
|     | *Adjusted to reflect all prior rate of   |                                   |                           |
|     | **Change in Company's premium  | level which will result from      | application of new rates. |
|     | •  | QBE Insurance Co                  |                           |
|     |  |                                   | me of Company             |
|     |  | land Kigar VD S                   | Pata & Earm Cilinas       |

Rate & Form Filings Official - Title

# FORM (RF-3)

## SUMMARY SHEET

|   | (1)  | (2)<br>Annual Premium                 | (3)<br>Percent             |
|---|--|---------------------------------------|----------------------------|
|   | Coverage   | Volume (Illinois) *                   | Change (+or-) **           |
|   | Automobile Liability Private Passenger                       |                                       |                            |
|   | Commercial   | 5,371,916                             | +0.2%                      |
| _ | Automobile Physical Damag Private Passenger                  |                                       |                            |
|   | Commercial   | 1,040,694                             | +0.0%                      |
|   | Liability Other Than Auto                                    |                                       |                            |
|   | Burglary and Theft   |                                       |                            |
|   | Glass  |                                       |                            |
|   | Fidelity   | ·                                     |                            |
|   | Surety   |                                       |                            |
|   | Boiler and Machinery   | <del></del>                           |                            |
|   | Fire   |                                       |                            |
|   | Extended Coverage  |                                       |                            |
|   | Inland Marine  | · · · · · · · · · · · · · · · · · · · |                            |
|   | Homeowners   |                                       |                            |
|   | Commercial Multi-Peril                                       |                                       |                            |
|   | Crop Hail  |                                       |                            |
|   | Other  |                                       | <del></del>                |
|   | Line of Insurance  |                                       |                            |
|   | Does filing only apply to certa Classes? If so,              | in territory (territories) or         | certain                    |
|   | specify: No No   | <del>-</del>                          |                            |
|   | Brief description of filing. (If fi                          | iling follows rates of an a           | dvisory                    |
|   | Organization, specify organization):                         | Ť                                     | •                          |
|   | organization).   | Adopt CA-2014-RIL1 & C                | A-2014-RILC                |
|   |  |                                       |                            |
|   | *Adjusted to reflect all prior ra **Change in Company's prem | _                                     | lt from application of nev |
|   | rates.   | Sentry Select Insu                    | rance Company              |
|   |  | Na                                    | me of Company              |
|   |  | Mike Williams - VP                    |                            |
|   |  |                                       | Official - Title           |

#### **SUMMARY SHEET**

Andrea Coalson, Actuarial Analyst
Official - Title

|            | Change in Company's premium or ra   | te level produced by rate revision effective   | 01/01/2015  |
|------------|---|--|---|
|            | (1)   | (2)<br>Annual Premium  | (3)<br>Percent                                      |
|            | Coverage  | Volume (Illinois)*   | Change $(+ \text{ or } -)^{**}$                     |
| 1.         | Automobile Liability  |  |   |
| •          | Private Passenger   |  |   |
|            | Commercial  | 7,973  | 6.6%  |
| 2.         | Automobile Physical Damage  |  |   |
|            | Private Passenger   |  |   |
|            | Commercial  | 3,254  | 16.3%   |
| 3.         | Liability Other Than Auto   |  |   |
|            | Burglary and Theft  |  |   |
|            | Glass   |  |   |
|            | Fidelity  |  |   |
|            | Surety  |  |   |
|            | Boiler and Machinery  |  |   |
| ١.         | Fire  | · -  |   |
| ł.         | Extended Coverage   |  |   |
| •          | Inland Marine   |  |   |
|            | Homeowners  | *  |   |
|            | Commercial Multi-Peril  |  |   |
| •          | Crop Hail   | **************************************   |   |
|            | Other Line of Insurance   |  |   |
|            | iling only apply to certain territory (t  | erritories) or certain classes? If so, specify:  |   |
| ),         |   | · · · · · · · · · · · · · · · · · · ·  |   |
| e a<br>4-2 | are adopting the following ISO loss of 2012-RZRLC, CA-2014-RBIR1, CA-<br>are also changing our loss cost multip | s rates of an advisory organization, specify osts/rules filings: CA-2014-BRLA1, CA-2012014-RPAC1, CA-2013-RVTS1, CA-2013 liers to 1.490 and 1.585 for Liability and Ph | 14-RBIL1, CA-2013-RBILC,<br>-RBIRU and CA-2012-RZR1 |
| Cl         | djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates. |  |   |

FORM (RF-3)

#### SUMMARY SHEET

|       | (1)<br>Coverage   | (2)<br>Annual Premium<br>Volume (Illinois) * | (3)<br>Percent<br>Change (+or-) ** |
|-------|---|--|------------------------------------|
| ۱. ٔ  | Automobile Liability Private  |  |                                    |
|       | Passenger   |  |                                    |
|       | Commercial  | -386   | 8.0                                |
| •<br> | Automobile Physical Damage Private Passenger  |  |                                    |
|       | Commercial  | -15  | 8.0                                |
|       | Liability Other Than Auto   |  | ·- ·                               |
|       | Burglary and Theft  |  |                                    |
|       | Glass   |  |                                    |
|       | Fidelity  |  |                                    |
|       | Surety  |  |                                    |
|       | Boiler and Machinery  |  |                                    |
|       | Fire  |  |                                    |
| 0.    | Extended Coverage   |  |                                    |
| 1.    | Inland Marine   |  |                                    |
| 2.    | Homeowners  |  |                                    |
| 3.    | Commercial Multi-Peril  |  |                                    |
| 4.    | Crop Hail   |  |                                    |
| 5.    | Other   |  |                                    |
|       | Life of Insurance   |  |                                    |
|       | Does filing only apply to certain t Classes? If so, specify:                                  |  |                                    |
|       | Brief description of filing. (If filing Organization, specify organization): ISO Adoption CA- |  | ry<br>                             |
|       |   |  |                                    |
|       |   | <u> </u>                                     |                                    |
|       | *Adjusted to reflect all prior rate * **Change in Company's premium                           |  | m application of new rates.        |
|       |   | Stonington Insu                              | rance Company                      |
|       |   |  | lame of Company                    |
|       |   | <u> Janet Kiger - VF</u>                     | Rate & Form Filings                |
|       |   |  | Official – Title                   |

# FORM (RF-3)

#### **SUMMARY SHEET**

| -              | (1)  | (2)<br>Annual Premium       | (3)<br>Percent                        |
|----------------|--|-----------------------------|---------------------------------------|
| -              | Coverage   | Volume (Illinois) *         | Change (+or-) **                      |
| 1.             | Automobile Liability Private   | - voidino (minolo)          | _ Change (101)                        |
|                | Passenger  |                             |                                       |
|                | Commercial   | 500,000                     | .002                                  |
| <u> </u>       | -Automobile Physical Damag   |                             |                                       |
|                | Private Passenger  |                             |                                       |
|                | Commercial   |                             |                                       |
| 3.             | Liability Other Than Auto  |                             |                                       |
| ١.             | Burglary and Theft   |                             |                                       |
| j.             | Glass  |                             |                                       |
| Š.             | Fidelity   |                             | <u> </u>                              |
|                | Surety   |                             |                                       |
|                | Boiler and Machinery   |                             |                                       |
|                | Fire   |                             |                                       |
| 0.<br>1.       | Extended Coverage  |                             |                                       |
| ı.<br>2.       | Inland Marine  |                             |                                       |
| 2.<br>3.       | Homeowners Commercial Multi-Peril                                    |                             |                                       |
| 3.<br>4.       | Crop Hail  | <del></del>                 |                                       |
| <del>5</del> . | Other  |                             |                                       |
| <b>.</b>       | Life of Insurance  |                             |                                       |
| •              | Does filing only apply to certa Classes? If so, specify: statewid    |                             | certain                               |
|                |  |                             |                                       |
|                | Brief description of filing. (If fill Organization, specify          | iling follows rates of an a | dvisory                               |
|                | organization):   | \$5.00 increase in UM rates | s for basic limits as a result of the |
|                | increase in the financial responsibility lim                         | nits.                       |                                       |
|                | *A divisted to reflect all print re                                  | to abangon                  |                                       |
|                | *Adjusted to reflect all prior ra<br>**Change in Company's premates. |                             | t from application of new             |
|                | rates,   | Unique Insurance (          | Co                                    |
|                |  |                             | ne of Company                         |
|                |  | Paul Pitalis Cons.          |                                       |
|                |  | <u> </u>                    | Official – Title                      |

# Section 754.EXHIBIT A Summary Sheet (Form RF-3)

## FORM (RF-3)

#### **SUMMARY SHEET**

| (1)                  | (2)<br>Annual Premium                  | (3)<br>Percent                     |
|----------------------|--|------------------------------------|
| Coverage             | Volume (Illinois) *                    | Change (+or-) **                   |
| Automobile Liabilit  | Private                                |                                    |
| Passenger            | 7,931,215                              | +3.0%                              |
| Commercial           |  |                                    |
| Automobile Physic    | l Damag                                |                                    |
| Private Passenger    | 5,123,405                              | <del></del>                        |
| Commercial           |  |                                    |
| Liability Other Than | Auto                                   |                                    |
| Burglary and Theft   |  |                                    |
| Glass                |  |                                    |
| Fidelity             | ·                                      |                                    |
| Surety               |  |                                    |
| Boiler and Machine   | у                                      |                                    |
| Fire                 |  |                                    |
| Extended Coverag     |  |                                    |
| Inland Marine        |  |                                    |
| . Homeowners         |  |                                    |
| Commercial Multi-F   | eril                                   |                                    |
| . Crop Hail          |  |                                    |
| Other                |  |                                    |
| Line of Insu         | ance                                   |                                    |
| Does filing only an  | ly to certain territory (territories)  | or cortain                         |
| Classes? If so,      | iy to certain termory (termones)       | or certain                         |
| specify:             | All Territories and Classes            |                                    |
| opcony.              |  |                                    |
| Brief description of | filing. (If filing follows rates of ar | advisorv                           |
| Organization, spec   |  |                                    |
| organization):       | •                                      | iability (BI,PD,UMBI): 3% UMPD: 3% |
| Medical Payments: 3% |  |                                    |

United Equitable Insurance Company Name of Company John P. Heywood, President/COO Official - Title

rates.